PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where ir m

appropriate. All further indicated unless correcte maintenance fee notifical	correspondence including d below or directed oth	ng the Patent, advance or herwise in Block 1, by (a	ders and notification of r) specifying a new corres	maintenance fees w spondence address;	rill be mailed to the curren and/or (b) indicating a sep	t correspondence address as parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
22442 7590 11/15/2006					tificate of Mailing or Tran	smission	
SHERIDAN ROSS PC 1560 BROADWAY				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. (Depositor's name)			
SUITE 1200							
DENVER, CO 80202							
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/660,118 09/10/2003		Carl W. White		2879-98	7778		
TITLE OF INVENTION: PRODUCT AND PROCESS FOR LIQUEFACTION OF MUCUS FOR SPUTUM							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU			
nonprovisional	NO	\$1400 - \$700	\$300	\$0	.\$1700\$	1000 02/15/2007	
ÉXAMINER		ART UNIT	CLASS-SUBCLASS				
MOHAMED, ABDEL A		1654	424-185100	· · · · · · · · · · · · · · · · · · ·			
1. Change of corresponde CFR 1.363).	ence address or indication	n of "Fee Address" (37	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a				
Change of corresp Address form PTO/SI	ondence address (or Cha	nge of Correspondence					
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
			THE PATENT (print or ty				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
NATIONAL JEWISH MEDICAL AND RESEARCH CENTER DENVER, COLORADO							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government							
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
Issue Fee			A check is enclosed.				
Publication Fee (No small entity discount permitted) Advance Order - # of Copies The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any							
Advance Order -	# of Copies		overpayment, to Depo	osit Account Numb	er (enclose	an extra copy of this form).	
5. Change in Entity Status (from status indicated above) \[\begin{align*} \text{ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.} \] \[\begin{align*} \text{ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).} \]							
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.							
Authorized Signature	/Angela Dall	as Sebor/		Date	February 12, 20	07	
Typed or printed name Angela Dallas Sebor				Date February 12, 2007 Registration No42,460			
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	nation is required by 37 (tiality is governed by 35 d application form to the ions for reducing this bu /irginia 22313-1450. DO 113-1450.	6 U.S.C. 122 and 37 CFR e USPTO. Time will vary rden, should be sent to th O NOT SEND FEES OR	1.14. This collection is estailed to the indicate of the collection of the complete of the collection of the c	retain a benefit by stimated to take 12 vidual case. Any coper, U.S. Patent and O THIS ADDRES	the public which is to file (a	nd by the USPTO to process) ling gathering, preparing, and time you require to complete partment of Commerce, P.O. er for Patents, P.O. Box 1450,	